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CONFIRMATION NO. 4534

SERIAL NUMBER 10/813,292	FILING DATE 03/30/2004  RULE	CLASS 340	GROUP ART UNIT 2636	ATTORNEY DOCKET NO.
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/486,614 07/11/2003

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## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

None  
AL

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 06/23/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY IN	SHEETS DRAWING 2	TOTAL CLAIMS 22	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature AL	Initials		

## ADDRESS

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46204

## TITLE

Orthopaedic components with data storage element

FILING FEE  RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )
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